

## Statewide Coordinating Council for Public Health District Coordinating Council Update

**District: CUMBERLAND** 

Date: 03/18/10

Brief review of decisions and outcomes from DCC meetings held since last SCC meeting (please attach agendas):

The Council met on January 15, 2010. The meeting agenda included three organization briefs from Council Members, a report to the Council on the events of the 12/10 SCC meeting, a financial report, a H1N1 update from the H1N1 Taskforce, Council by-laws amendments, a progress report from the Healthy Cumberland subcommittee, an update from the Membership Committee, and a discussion of medication collections and LD 821.

March 19<sup>th</sup> Council Meeting will consist of our District Health Forum (preceded by district H1N1 Debrief Session)

(next full Council meeting is May 21)

Ongoing or upcoming projects or priority issues:

Executive Committee is working on strengthening the 6 standing committees, clarifying their charges:

Membership

Health Data

Advocacy

Healthy Cumberland

Communications

**Fundraising** 

The Executive Committee reviewed draft documentation for each committee's charge. The Cumberland H1N1 Leadership Team submitted a proposal to the Executive Committee to form a Public Health Preparedness Committee, which was accepted. That committee will be starting this spring.

Membership Committee continues to assess the representativeness of DCC's membership, identify vacancies and make recommendations to ensure broad representation in both the membership and committees.

Status of Local Public Health System Assessment:

Waiting for final report from Maine Center for Public Health and for District Health Improvement Plan before determining next steps.

## Organizations represented at meeting(s):

- CarePartners/MedAccess
- Catholic Charities
- City of Portland. Health and Human Services, Public Health Division
- Community Counseling Center
- Cumberland County
- Cumberland County Emergency Managements Agency
- Cumberland County Soil and Water Conservation District
- Family Crisis Services
- Greater Portland Council of Governments
- Home Health Visiting Nurses
- Local Health Officers
- Maine Center for Disease Control and Prevention



## Statewide Coordinating Council for Public Health District Coordinating Council Update

- MaineHealth
- Maine State Legislative Representative (Portland)
- Mercy Health System
- Municipalities
- Northern New England Poison Center
- People's Regional Opportunity Program
- Planned Parenthood of Northern New England
- Portland Water District
- Southern Maine Agency on Aging
- Southern Maine Regional Resource Center
- St. Joseph's College
- University of New England
- University of Southern Maine, Muskie School of Public Service
- VNA Home Health and Hospice
- Westbrook School Health Program
- Woodfords Family Services

In-district or multi-district collaborations:

H1N1 Leadership Team – shared leadership between MCDC, Cumberland County EMA, and Southern Maine Regional Resource Center with key partners in City of Portland/Portland Public Health, VNA Home Health & Hospice (Mercy) and Home Health Visiting Nurses (all members of the DCC). Vaccine Coordinator/District Liaison ensure communication link between larger DCC and H1N1 Leadership Team. This Leadership Team is now in the process of evolving and expanding into a new Public Health Preparedness Committee of the Council.

Medication Collection initiative – The medication collection planning committee has reconvened to prepare for a spring collection–most likely in June. The committee will be exploring multiple collection sites across the District.

Issues or topics to be addressed by SCC:

Interest in carving out time in SCC for discussion about big picture progress DCC's are making in terms of strengthening Maine's public health infrastructure – understand challenges & strategize collectively, share bylaws, etc.

Other district issues (external to the DCC) that impact public health

## <sup>1</sup>Sec. 5. 22 MRSA c. 152

A district coordinating council for public health shall:

- 1. Participate as appropriate in district-level activities to help ensure the state public health system in each district is ready and maintained for accreditation;
- 2. Provide a mechanism for district-wide input to the state health plan under Title 2, section 103;
- 3. Ensure that the goals and strategies of the state health plan are addressed in the district; and
- 4. Ensure that the essential public health services and resources are provided for in each district in the most efficient, effective and evidence-based manner possible.